

**REPORT OF RECEIPTS AND EXPENDITURES
OF A POLITICAL COMMITTEE**

State Form 4606 (R13/11-05)

Indiana Election Commission (IC 3-9-5-14)

**(CFA-4)
Summary Sheet****FILE NUMBER**

6180

TOTAL PAGES IN ENTIRE CFA-4 REPORT

4

INSTRUCTIONS: Please type or print legibly **IN BLACK INK** all information on this form. For assistance in completing this form, see instructions on the reverse side.

IS THIS AN AMENDMENT? ☐ Yes ☒ No**COMMITTEE INFORMATION**1. Full name of committee (as on Statement of Organization) ☐ Check if this is a new name
Hall Render Killian Heath & Lyman Employee Political Action Committee2. Acronym or abbreviated name, if any
Hall Way PAC3. Committee telephone number
(317) 633-48844. Mailing address (address where all campaign finance correspondence is received) ☐ Check if this is a new address
ONE AMERICAN SQUARE, STE. 20005. City, state, ZIP code
INDIANAPOLIS IN 46282

6. Party affiliation (if applicable)

CANDIDATE INFORMATION (For Candidate's Committee Only)

7. Full name of candidate (include any nickname)

8. Party affiliation or if independent

9. Office sought (include district number, if any. **Not required for exploratory committee.**)

10. County of residence

TYPE OF REPORT**CONVENTION CANDIDATES ONLY**11.
Annual12. Check one:
☐ Pre-Convention
☐ Post-Convention12. Reporting period:
From: 10/11/2014 Through: 12/31/2014**COLUMN A
This Period****COLUMN B
Year to Date**

13. Cash on hand and investments at the beginning of this reporting period.

81,493.53

14. Cash on hand and investments January 1, current year.

97,003.38

CONTRIBUTIONS AND RECEIPTS

(Note: These amounts include in-kind contributions and loans, as well as cash contributions.)

15a. Itemized (use Schedule A)

382.65

5,869.78

15b. Unitemized

0.00

0.00

15c. Add lines 15a, and 15b in both columns

SUBTOTAL

382.65

5,869.78

16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B

TOTAL

81,876.18

102,873.16

EXPENDITURES

(Note: These amounts include in-kind expenditures and loan repayments.)

17a. Itemized (use Schedule B) (Public Question: use Schedule C)

1,000.00

21,996.98

17b. Unitemized

0.00

0.00

17c. Add lines 17a and 17b in both columns

SUBTOTAL

1,000.00

21,996.98

18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns)

TOTAL

80,876.18

80,876.18

19. Debts OWED BY the committee (use Schedule D)

0.00

20. Debts OWED TO the committee (use Schedule E)

0.00

CERTIFICATION

I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT, TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.

Signature of Treasurer

Signature Included

Title

Treasurer

Date

01/13/2015

Signature of Candidate (if applicable)

Signature Included

Date

01/13/2015

WARNING: Any information contained in this report may not be copied for sale or used for any commercial purpose.
(IC 3-9-4-5) A person who knowingly files a fraudulent report commits a Class D Felony. (IC 3-14-1-13) A person who fails to file a complete or accurate report as required by the Indiana Campaign Finance Law commits a Class B Misdemeanor (IC 3-14-1-14) and may be subject to civil penalties (IC 3-9-4-16, 3-9-4-17, 3-9-4-18.)

FOR OFFICE USE ONLYFiled: Online
1/13/15 8:50 am**FILED**

JAN 13 2015

Mylen A. Eldridge

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**(CFA-4 SCHEDULE A-1)
CONTRIBUTIONS BY INDIVIDUALS
Itemized Contributions and Other**

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly **IN BLACK INK** all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals **OVER \$100** per contributor, within a calendar year **MUST** be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) **OVER \$100** per contributor, within a calendar year, **MUST** be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

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CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED	
				RECEIVED BY	
1 Brian Bauer 12935 Paradise Drive DeWitt MI 48820 Contributor's Occupation (if required): Attorney/Legal -	Contribution: Direct	35.38	778.36	10/24/2014	
				J. Ullom	
2 William D Roberts 1704 Longwood Circle Goshen KY 40026 Contributor's Occupation (if required): Attorney/Legal -	Contribution: Direct	41.15	905.30	10/24/2014	
				J. Ullom	
3 Brian Bauer 12935 Paradise Drive DeWitt MI 48820 Contributor's Occupation (if required): Attorney/Legal -	Contribution: Direct	35.38	813.74	11/07/2014	
				J. Ullom	
4 William D Roberts 1704 Longwood Circle Goshen KY 40026 Contributor's Occupation (if required): Attorney/Legal -	Contribution: Direct	41.15	946.45	11/07/2014	
				J. Ullom	
5 Brian Bauer 12935 Paradise Drive DeWitt MI 48820 Contributor's Occupation (if required): Attorney/Legal -	Contribution: Direct	35.38	849.12	11/21/2014	
				J. Ullom	
SUB TOTAL THIS PAGE OF SCHEDULE A		\$	188.44		
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet)		\$			



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**(CFA-4 SCHEDULE A-1)
CONTRIBUTIONS BY INDIVIDUALS
Itemized Contributions and Other**

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CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state ZIP code)		TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1 William D Roberts 1704 Longwood Circle Goshen KY 40026 Contributor's Occupation (if required): Attorney/Legal -	Contribution: Direct	41.15	987.60	11/21/2014	
				J. Ullom	
2 Brian Bauer 12935 Paradise Drive DeWitt MI 48820 Contributor's Occupation (if required): Attorney/Legal -	Contribution: Direct	35.38	884.50	12/05/2014	
				J. Ullom	
3 William D Roberts 1704 Longwood Circle Goshen KY 40026 Contributor's Occupation (if required): Attorney/Legal -	Contribution: Direct	41.15	1,028.75	12/05/2014	
				J. Ullom	
4 Brian Bauer 12935 Paradise Drive DeWitt MI 48820 Contributor's Occupation (if required): Attorney/Legal -	Contribution: Direct	35.38	919.88	12/19/2014	
				J. Ullom	
5 William D Roberts 1704 Longwood Circle Goshen KY 40026 Contributor's Occupation (if required): Attorney/Legal -	Contribution: Direct	41.15	1,069.90	12/19/2014	
				J. Ullom	
SUB TOTAL THIS PAGE OF SCHEDULE A			\$ 194.21		
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet)			\$ 382.65		



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**(CFA-4 SCHEDULE B)
Itemized Expenditures**

INSTRUCTIONS: Please type or print legibly **IN BLACK INK** all information on this form. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities **OVER \$100** per recipient, within a calendar year **MUST** be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) **MUST** be itemized on this schedule.

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RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
	OFFICE SOUGHT (if applicable)				
Code: Contributions 1 Committee to Elect Dennis Tyler 4300 N Manchester Road Muncie IN 47304	Mayor of Muncie	Direct Purpose: Campaign Contribution	1,000.00	1,000.00	12/11/2014
SUB TOTAL THIS PAGE OF SCHEDULE B			\$ 1,000.00		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet)			\$ 1,000.00		